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UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Farris, Barry)
Serial No.: 09/524,213) Art Unit: 3751
Filed: March 13, 2000) Examiner: Maust, T.
Title: Method and Apparatus for the) Docket No.: 30008-pa
Storage and Transfer of a)
Lyophilisate)

To: Commissioner of Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

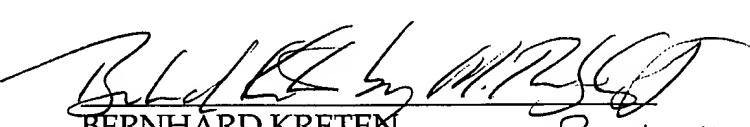
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Authorization to Charge Deposit Account

It is respectfully submitted that no filing fees are due for the submitted Amendment. However, should any additional fees be due with respect to this filing, they should be charged to undersigned's deposit account number 11-1734, attorney docket number 30008-pa. A duplicate copy of this authorization is enclosed.

Dated: November 15, 2004

Respectfully Submitted:


BERNHARD KRETEK

Registration No.: 27,037

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Reg. No. 47,474

Attorney for Applicant



NOV 18 2004

ATTORNEY'S DOCKET NO.

In re the application of:

Serial No.:

Filed:

For:

Farris, Barry

09/524,213

March 13, 2000

Method and Apparatus for the Storage and Transfer of a Lyophilisate

Commissioner for Patents

Post Office Box 1450

Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

 x No additional fee is required.

The fee has been calculated as shown below:

(Col 1) Claims Remaining After Amendment	(Col 2) Highest No. Previously Paid For	(Col 3) Small Entity:		Other Than A Small Entity:		
		Present Extra	Rate	Addit. Fee	Rate	Addit. Fee
Total: *40	Minus **48	X	x 9.=	0.	x 18.=	0.
Indep.: *6	Minus **6	X	x 44.=	0.	x 88.=	0.
Total:						\$0.

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

***If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total of Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

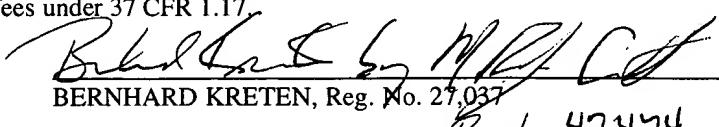
A check in the amount of \$XXX is enclosed to cover the filing fee for the presentation of additional claims.

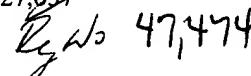
The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 11-1734. A Duplicate copy of this sheet is enclosed.

XXX Any additional filing fees required under 37 CFR 1.16 for the presentation of extra claims.

 — Any patent application processing fees under 37 CFR 1.17.

Dated: November 15, 2004


BERNHARD KRETEN, Reg. No. 27,037


Reg. No. 47,474



CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

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Paper:

1. Amendment Responsive to the Decision on Appeal mailed September 15, 2004;
2. Amendment Transmittal Letter (in duplicate);
3. Certificate of Mailing under CFR 1.8 (a); and
4. Return Receipt Card.

I hereby certify that the above identified correspondence, which is attached, is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

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on November 15, 2004.

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Robin Southworth

Robin Southworth
(Signature)

November 15, 2004
(Date of Signature)

30008-pa